

## Adult Family Home Disclosure of Services **Required by RCW 70.128.280**

HOME/PROVIDER INTEGRITY CARE HOME / NAUMIE LANE	LICENSE NUMBER 751728

**NOTE:** The term "the home" refers to the adult family home / provider listed above.

The scope of care, services, and activities listed on this form may not reflect all required care and services the home must provide. The home may not be able to provide services beyond those disclosed on this form, unless the needs can be met through "reasonable accommodations." The home may also need to reduce the level of care they are able to provide based on the needs of the residents already in the home. For more information on reasonable accommodations and the regulations for adult family homes, see Chapter 388-76 of Washington Administrative Code.

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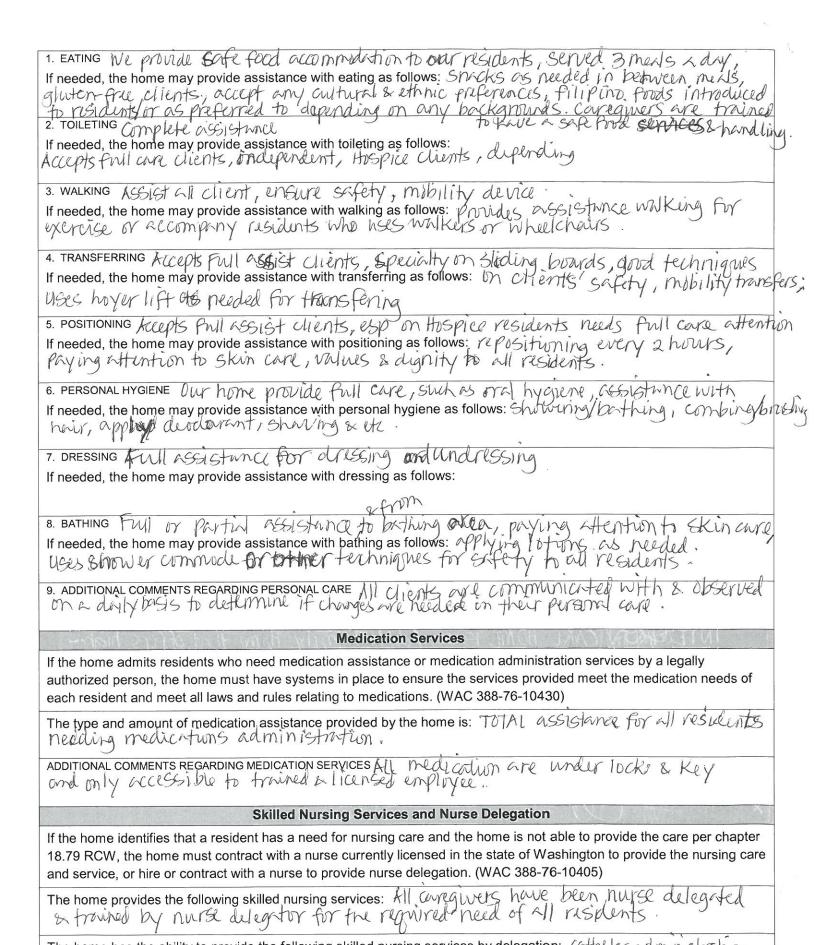
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RCS/Public Disclosure

About the Home	
1. PROVIDERS STATEMENT (OPTIONAL)	
The optional provider's statement is free text description of the mission, values, and/or other distinct attributes of the home. INTEGRITY CARE HOME IS an Adult Family Him that offers high-quality care by educated, compassionate caregivers who pay attention to detail & the needs of each client. The comfort, safety, & rights of all clients are of utmost importance to us. The families of our clients are totally appreciative of the outstanding level of care.  2. Initial licensing date 3. Other address or addresses where provide has been licensed:  Aug. 4, 2010 3210 NE 126th AVE., VANCOUVER, WA 98682  4. SAME ADDRESS PREVIOUSLY LICENSED AS: Same as above	
5. OWNERSHIP  Sole proprietor  Limited Liability Corporation  □ Limited Liability Corporation	
🗵 Co-owned by: TOMMY R. LANE	
Other:	
Personal Care	
"Personal care services" means both physical assistance and/or prompting and supervising the performance of direct	

personal care tasks as determined by the resident's needs, and does not include assistance with tasks performed by a

licensed health professional. (WAC 388-76-10000)



The home has the ability to provide the following skilled nursing services by delegation: Catheter administration, oftony brog, nutritional tube, or any special skyled nursing needed for circuits.

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additional comments regarding skilled nursing service and nursing delegation whenever a need exists for nursing delegation training the facility has access to the appropriate nurse trainor.
Specialty Care Designations
We have completed DSHS approved training for the following specialty care designations:
☐ Developmental disabilities ☐ Mental illness ☐ Dementia
ADDITIONAL COMMENTS REGARDING SPECIALTY CARE DESIGNATIONS ALZheimer's diseases, Paraplegia, Quadriplegia, Parkinson's diseases  Staffing
The home's provider or entity representative must live in the home, or employ or have a contract with a resident manager who lives in the home and is responsible for the care and services of each resident at all times. The provider, entity representative, or resident manager is exempt from the requirement to live in the home if the home has 24-hour staffing coverage and a staff person who can make needed decisions is always present in the home. (WAC 388-76-10040)
☐ The provider lives in the home.
A resident manager lives in the home and is responsible for the care and services of each resident at all times.
The provider, entity representative, or resident manager does not live in the home but the home has 24-hour staffing coverage, and a staff person who can make needed decisions is always present in the home.
The normal staffing levels for the home are:
Registered nurse, days and times:
☐ Licensed practical nurse, days and times:
Certified nursing assistant or long term care workers, days and times: 7 days a Welk 24 hours a day
Awake staff at night
☐ Other:
ADDITIONAL COMMENTS REGARDING STAFFING Provider is awilable at all times for consultations with the licensed caregivers.
Cultural or Language Access
The home must serve meals that accommodate cultural and ethnic backgrounds (388-76-10415) and provide informational materials in a language understood by residents and prospective residents (Chapter 388-76 various sections)
The home is particularly focused on residents with the following background and/or languages: English speaking Coulcasians & filipino.
ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS All Caregivers currently are bilingual English & filipino speakers.
Medicaid
The home must fully disclose the home's policy on accepting Medicaid payments. The policy must clearly state the circumstances under which the home provides care for Medicaid eligible residents and for residents who become eligible for Medicaid after admission. (WAC 388-76-10522)
☐ The home is a private pay facility and does not accept Medicaid payments.
The home will accept Medicaid payments under the following conditions:
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ADDITIONAL COMMENTS REGARDING MEDICAID We don't accept aggresive. Clients or clients with a history of running away or a history of mistreating caregivers or other residents.

Activities

The home must provide each resident with a list of activities customarily available in the home or arranged for by the home (WAC 388-76-10530).

The home provides the following services: Sing-a-long, Bingo, Puzzles, Birthday culebratums, Nature walks in the reighborhood, Dutside intertainment, & special holiday culebratums additional comments regarding activities

We are open to activity suggestions from the residents

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